



REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to: Mail Stop RCE Commissioner for Patents P.O. 1450 Alexandria, VA 22313-1450

09/750,533
December 28, 2000
Robert ADAMS
2142
Blair, Douglas B.
42390P9895

March 2, 2006

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR § 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. Submission required under 37 CFR 1.114 Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s). Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked. Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on March 4, 2005 ii. ☐ Other X Enclosed Information Disclosure Statement (IDS) ☐ Affidavit(s)/Declaration(s) iv. Other 2. Miscellaneous Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required) Other 3. The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. Fees The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 02-2666. I have enclosed a duplicate copy of this sheet. RCE fee required under 37 CFR 1.17(e) and any additional claims fee(s) i. Extension of time fee (37 CFR 1.136 and 1.17) ii. ☐ Other: (\$.00) iii. □ Check in the amount of \$790.00 enclosed Payment by credit card (Form PTO-2038 enclosd) WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED Registration No. (Attorney/Agent) 42,879 Name (Print/Type) Paul **1e**ndonsa March 2, 2006 Date Signature CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. March 2, 2006 Julie Dussault Name (Print/Type)

Date

Based on PTO/SB/30 (04-05) as modified by Blakely, Solokoff, Taylor & Zafman (wlr) 11/30/2005. SEND TO: Mail Stop RCE Commissioner in Response Proceedings. P.O. Box 1450, Alexandria, VA 22313-1450 03/07/2006 YPOLITE1 00000108

Signature



EE TRANSMITTAL EY 2005

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$

5)	890.00

Complete if Known						
Application Number	09/750,533					
Filing Date	December 28, 2000					
First Named Inventor	Robert ADAMS					
Examiner Name	Blair, Douglas B.					
Art Unit	2142					
Attorney Docket No.	42390P9895					

METHOD OF PAYMENT (check all that apply)	
☑Check ☐Credit card ☐ Money Order ☐None ☐C	Other (please identify):
Deposit Account Deposit Account Number: 02-2666 Deposit Account Deposit Account Number: 02-2666	eposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP
For the above-identified deposit account, the Director is he ☐ Charge fee(s) indicated below Charge any additional fee(s) or underpayment of fee(under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.	Charge fee(s) indicated below, except for the filing fee

FEE CALCULATION

1. EXTRA CLAIM FEES			Extra Claims	_	Fee from below		Fee Paid
Total Claims	32	30* =	2	x	50.00	=	\$100.00
Independent Claims	3	· 3* =	0]x	200.00	=	\$0.00
Multiple Dependen	t					=	

Large E	ntity	Small	Entity	
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2203	180	Multiple Dependent claim, if not paid
1204	790	2204	395	**Reissue independent daims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent
		•	SUE	STOTAL (1) (\$) 100.00

**or number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES Large Entity Small Entity

Laige	Linkly	Jilla				
Fee Code	Fee (\$)	Fee Code	Fee (\$)	- Fee Description		Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath		
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.		
2053	130	2053	130	Non-English specification		
1251	120	2251	60	Extension for reply within first month		LI
1252	450	2252	225	Extension for reply within second month		
1253	1,020	2253	510	Extension for reply within third month		
1254	1,590	2254	795	Extension for reply within fourth month		I
1255	2,160	2255	1,080	Extension for reply within fifth month		l
1401	500	2401	250	Notice of Appeal		
1402	500	2402	250	Filing a brief in support of an appeal		
1403	1,000	2403	500	Request for oral hearing		
1451	1,510	2451	1,510	Petition to institute a public use proceeding		
1460	130	2460	130	Petitions to the Commissioner		L
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
1806	180	1806	180	Submission of Information Disclosure Stmt		
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))		
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))		
Other fee	e (specify)		Requ	est for Continued Examination		
				SUBTOTAL (2)	(\$)	790.00

SUBMITTED BY Complete (if applicable)						
Name (Print/Type)	Paul A. Mendonsa	Registration No. (Attorney/Agent)	42,879	Telephone	(503) 439-8778	
Signature Manda				Date	03/02/06	